

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2007 08:00 A
Secretary of State

DOCUMENT # N00000004330

1. Entity Name

MITCHELL HIGH SCHOOL ATHLETIC BOOSTERS CLUB,
INC.



Principal Place of Business

Mailing Address

2323 LITTLE ROAD
NEW PORT RICHEY FL 34655

2323 LITTLE ROAD
NEW PORT RICHEY FL 34655

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3656534

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/06)



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MOONEY, IAN
2323 LITTLE ROAD
NEW PORT RICHEY FL 34655

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME MOONEY, IAN
STREET ADDRESS 2323 LITTLE ROAD
CITY-STATE-ZIP NEW PORT RICHEY FL 34655

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP
000000760660
05/25/07-80022-019 61.25

TITLE VD ☐ Delete
NAME HELFRICH, FRAN
STREET ADDRESS 2323 LITTLE ROAD
CITY-STATE-ZIP NEW PORT RICHEY FL 34655

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE SD ☐ Delete
NAME BISBE, SCOTT
STREET ADDRESS 2523 LITTLE RD
CITY-STATE-ZIP NEW PORT RICHEY FL 34655

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE TD ☐ Delete
NAME SCHMITZ, W SCOTT
STREET ADDRESS 2323 LITTLE ROAD
CITY-STATE-ZIP NEW PORT RICHEY FL 34655

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

IAN MOONEY
IAN MOONEY

1-31-2007

727.774.9260